City of Portland, M	<b>Iaine</b>	- Building or Use 1	Permit Applica	tion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 0	)4101	Tel: (207) 874-8703	, Fax: (207) 874-	8716	2014-00061			053 B017001	
Location of Construction: Owner Name:				Owne	r Address:		Phone:		
		BK PROPERT	BK PROPERTIES LLC		PO BOX 6149 FALMOUTH, ME 04105			(207) 939-8410	
Business Name:		Contractor Name	Contractor Name:		actor Address:		Phone		
			Gene Electrical Service gene.martin71@gmail.com		10 Wildberry Lane Saco ME 04072			(207) 468-8695	
Lessee/Buyer's Name		Phone:	Phone:		<b>it Type:</b> e Alarm System		Zone:		
Past Use:		Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:			CEO District:	
Four Family			Four Family		\$60.00		,000.00	4	
·					INSPECTION:				
Proposed Project Description	n:								
install a Fire Alarm									
			PEDESTRIAN ACTIVITIES		TIES DISTRIC	; DISTRICT (P.A.D.)			
					ction: Appro	oved Appro	oved w/Cond Date		
Permit Taken By:						<del></del>			
bjs		Zoning Approval							
bjs 01/13/2014  1. This permit application does not preclude the			Special Zone or Reviews		Zon	Zoning Appeal		listoric Preservation	
	g applicable State and	Shoreland		☐ Variano	☐ Variance ☐		Not in District or Landman		
2. Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscell	laneous		Does Not Require Review	
3. Building permits are void if work is not star within six (6) months of the date of issuance False information may invalidate a building permit and stop all work			Flood Zone		Conditi	Conditional Use		Requires Review	
			Subdivision		☐ Interpretation		Approved		
			Site Plan		Approx	ved		Approved w/Conditions	
		Maj Minor MM		Denied	☐ Denied		Denied		
			Date:		Date:		Date:		
I hereby certify that I an I have been authorized by jurisdiction. In addition shall have the authority such permit.	by the operation, if a period	wner to make this applermit for work describe	ication as his authord in the application	hat the orized and is	proposed work agent and I agre aed, I certify tha	e to conform t at the code offi	o all appli icial's auth	cable laws of this orized representative	
SIGNATURE OF APPLICA	NT		ADE	ORESS		DATE		PHONE	